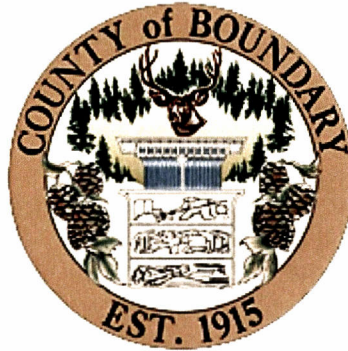


Glenda Poston  
Clerk/Auditor/Recorder  
Boundary County Courthouse  
E-mail: gposton@boundarycountyid.org



Court 208-267-5504  
Auditor 208-267-2242  
Fax 208-267-7814

**BOUNDARY COUNTY**  
**P. O. Box 419**  
**Bonnors Ferry, ID 83805**

**REQUEST TO EXAMINE OR COPY PUBLIC RECORDS**

Date: \_\_\_\_\_ Printed Name of Requestor \_\_\_\_\_

Requestor's Mailing Address: \_\_\_\_\_

Requestor's Daytime Phone Number: \_\_\_\_\_

Records Requested: (be specific) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I agree that any records obtained pursuant to this request will not be used as a mailing list or telephone number list prohibited by Idaho Code or as otherwise required or prohibited by law.

Signature of Requestor \_\_\_\_\_

**Request submitted to county attorney for review on** \_\_\_\_\_

Request Approved Date: \_\_\_\_\_ By: \_\_\_\_\_

**NOTE: Pursuant to I.C. 74-102(10)(b), if the above request is for more than 100 pages, includes records from which nonpublic information must be deleted, or the request exceeds two person hours, an additional fee may be charged.**

**Response to your request will be given within three (3) working days. If your request is approved, you will be notified the amount due if any. If your request is denied, you will be advised of the reason and you have 180 days to protest the denial. If for some reason more time is required to locate the requested information and make a decision as to access, we will notify you in writing and we have ten (10) days from the date of the request to approve or deny.**